

FEB 28 2013

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## SENATE CONCURRENT RESOLUTION

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REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL  
EFFECTS OF REQUIRING HEALTH INSURERS TO PROVIDE COVERAGE  
FOR MEDICALLY NECESSARY TREATMENT OF OROFACIAL ANOMALIES.

1 WHEREAS, in Hawaii, the rate of children with orofacial  
2 disorders is estimated to be one in every five hundred; and  
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4 WHEREAS, the rate of children in Hawaii with orofacial  
5 disorders is higher among the Asian, Pacific Islander, and  
6 Filipino populations that comprise the majority of the  
7 population of the State; and  
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9 WHEREAS, the more commonly known orofacial anomalies  
10 include cleft lip or cleft palate; and  
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12 WHEREAS, three hundred fifty two babies were born with  
13 cleft lip and/or cleft palate in Hawaii between 1986 and 2005;  
14 and  
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16 WHEREAS, orthodontics are the medically necessary  
17 treatments needed to proceed with subsequent reconstructive  
18 surgeries for these disorders; and  
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20 WHEREAS, orthodontics has been a covered medical benefit of  
21 the Hawaii Medicaid program for several years, and medically  
22 necessary orthodontics are included as an essential health  
23 benefit under pediatric oral health in the State's healthcare  
24 benefits package; and  
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26 WHEREAS, orthodontics are not included as a benefit of  
27 commercial health insurance; and  
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29 WHEREAS, without appropriate orthodontic care,  
30 reconstructive surgical outcomes are compromised and result in  
31 functional deficiencies in chewing, swallowing, respiration,



1 speech, unstable or malpositioned oral structures, premature  
2 tooth loss, and adverse psychosocial effects; and

3  
4 WHEREAS, these compromised surgical outcomes can create  
5 disparities in quality of care, quality of life, and functional  
6 outcomes for children with orofacial disorders; and

7  
8 WHEREAS, California, Colorado, Connecticut, Florida,  
9 Indiana, Louisiana, Maryland, Massachusetts, Minnesota, New  
10 York, North Carolina, Oregon, South Carolina, Texas, Vermont,  
11 Virginia, and Wisconsin have mandated health benefits, including  
12 orthodontic care coverage for orofacial and related disorders;  
13 and

14  
15 WHEREAS, mandated health benefits that include orthodontic  
16 care coverage for orofacial and related disorders aid in the  
17 average lifetime cost of \$10,250 for orthodontic care; and

18  
19 WHEREAS, section 23-51, Hawaii Revised Statutes, requires  
20 that "[b]efore any legislative measure that mandates health  
21 insurance coverage for specific health services, specific  
22 diseases, or certain providers of health care services as part  
23 of individual or group health insurance policies, can be  
24 considered, there shall be concurrent resolutions passed  
25 requesting the auditor to prepare and submit to the legislature  
26 a report that assesses both the social and financial effects of  
27 the proposed mandated coverage"; and

28  
29 WHEREAS, section 23-51, Hawaii Revised Statutes, further  
30 provides that "[t]he concurrent resolutions shall designate a  
31 specific legislative bill that:

- 32 (1) Has been introduced in the legislature; and  
33 (2) Includes, at minimum, information identifying the:  
34 (A) Specific health service, disease, or provider  
35 that would be covered;  
36 (B) Extent of the coverage;  
37 (C) Target groups that would be covered;  
38 (D) Limits on utilization, if any; and  
39 (E) Standards of care.

40 For purposes of this part, mandated health insurance coverage  
41 shall not include mandated optionals"; and

42  
43 WHEREAS, section 23-52, Hawaii Revised Statutes, further  
44 specifies the minimum information required for assessing the



1 social and financial impact of the proposed health coverage  
2 mandate in the Auditor's report; and  
3

4 WHEREAS, No. , introduced in the Regular Session  
5 of , mandates health insurance coverage for the treatment  
6 of orofacial anomalies for individuals, performed to correct or  
7 repair abnormal structures of the body, including but not  
8 limited to teeth, jaw, and related oral structures; ensure good  
9 health and adequate dental structures; and improve function of  
10 the affected structures and systems for all policies and  
11 contracts, hospital and medical service plan contracts, medical  
12 service corporation contracts, and health maintenance  
13 organization plans and contracts issued on or after December 31,  
14 ; and  
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16 WHEREAS, the Legislature believes that mandatory health  
17 insurance coverage for medically necessary treatment of  
18 orofacial anomalies will substantially offset the financial  
19 hardship on families needing treatment for their children,  
20 reduce compromised surgical outcomes, and assist in good health  
21 for children born with orofacial abnormalities in Hawaii; now,  
22 therefore,  
23

24 BE IT RESOLVED by the Senate of the Twenty-seventh  
25 Legislature of the State of Hawaii, Regular Session of 2013, the  
26 House of Representatives concurring, that the Auditor is  
27 requested to conduct an impact assessment in accordance with  
28 sections 23-51 and 23-52, Hawaii Revised Statutes, on the  
29 mandatory health insurance coverage of orofacial anomalies  
30 proposed by No. ; and  
31

32 BE IT FURTHER RESOLVED that the Auditor is requested to  
33 submit findings and recommendations to the Legislature,  
34 including any necessary implementing legislation, no later than  
35 twenty days prior to the convening of the Regular Session of  
36 2014; and  
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38 BE IT FURTHER RESOLVED that certified copies of this  
39 Concurrent Resolution be transmitted to the Auditor and to the  
40 Insurance Commissioner, who, in turn, is requested to transmit  
41 copies to each insurer in the State that issues health insurance  
42 policies, and to the Children with Special Needs Branch of the  
43 Department of Health, State Council on Developmental



# S.C.R. NO. 52

1 Disabilities, Lifetime of Smiles Support Group, Kapi'olani Cleft  
2 and Craniofacial Center, Kaiser Cleft Palate Clinic, Tripler  
3 Army Medical Center Craniofacial Center, Hawaii Maternal & Child  
4 Health Leadership Education in Neurodevelopmental & Related  
5 Disabilities Program, Hilopa'a Family to Family Health  
6 Information Center, and American Academy of Pediatrics - Hawaii  
7 Chapter.  
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9  
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OFFERED BY:

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